



STATE OF CONNECTICUT
DEPARTMENT OF AGRICULTURE
765 Asylum Avenue, Hartford, CT 06105
(860) 713-2506

License #

- ☐ New Facility
☐ Renewal
☐ New Owner
☐ New Location

License
Expiration: 12/31/2003

PET FACILITY LICENSE APPLICATION

CHECK ONE BOX:

☐ Pet Shop
FEE: \$200.00

☐ Grooming Facility
FEE: \$100.00

☐ Commercial Kennel
FEE: \$100.00

☐ Training Facility
FEE: \$100.00

Connecticut General Statutes Section 22-344 requires that a license must be obtained before opening and operating a Pet Shop, Grooming Facility, Commercial Kennel or Training Facility. Each initial application for a new license, new ownership or new location **must** be certified by the zoning official for that municipality, that such facility conforms to the municipal zoning regulations. Zoning certification is not *required* for license renewals **unless** there is a new owner or the business has moved to a new location. **Your license must be renewed no later than December 31st annually.** An individual dog license or a town-issued kennel license is required for dogs personally owned or kept by the applicant. Currently you may groom under a Commercial Kennel License without obtaining a separate Grooming Facility License. All dogs and cats over the age of three months must be vaccinated against rabies. The approval of this license application is subject to a passing inspection of the facility by an officer of the State Animal Control Division. A check payable to "Commissioner of Agriculture" must accompany the application.

RENEWAL APPLICATION FORM, RENEWAL APPLICATION CARD AND PAYMENT MUST BE RECEIVED ON OR BEFORE DECEMBER 31st

NOTE: Licenses for New and Renewal applications cannot be processed if: required payment is not submitted with the application; the application is incomplete and/or the Federal Employer Identification Number or Social Security Number is not provided, or a passing inspection of the facility has not been performed by a State Animal Control Officer. Incomplete applications and submitted payments will be returned for completion and resubmission.

Please Print or Type		FEDERAL Employer Identification Number: _____		Social Security Number: _____	
BUSINESS NAME			BUSINESS TELEPHONE		
BUSINESS ADDRESS			CITY / TOWN		ZIP CODE
MAILING ADDRESS (If different than business address)			CITY / TOWN		STATE ZIP CODE
Check One Box: <input type="checkbox"/> INDIVIDUAL OWNER <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> L.L.C. <input type="checkbox"/> CORPORATION					
NAME OF LICENSEE (Name of Owner, Name of Partnership; Name of L.L.C. or Name of Corporation)					
NAMES OF PARTNERS OR L.L.C. MEMBERS OR CORPORATE OFFICERS				HOME TELEPHONE	
(Print NAME OF APPLICANT)		(SIGNATURE OF APPLICANT)		(TITLE)	(DATE)

AREA BELOW FOR ZONING ENFORCEMENT USE ONLY.

TO BE COMPLETED BY THE ZONING ENFORCEMENT OFFICIAL

Zoning certification is ONLY required for a new owner of the business or when the business has moved to a new location. Zoning certification is *not required* for license renewals having no changes in ownership or location. A license for the above named new owner or new business location will not be issued by the Department of Agriculture unless this application is signed by a zoning official. The zoning official's signature certifies that the above business location and its proposed use is in conformance with existing city/town zoning regulations.

(Town) THE TOWN SEAL MUST BE AFFIXED TO THIS APPLICATION TO VALIDATE THE ZONING OFFICIAL'S SIGNATURE
(Seal)

(Print Name of Town) (Print or Type Name of Zoning Official) (Signature of Zoning Official) (Date)

AREA BELOW FOR OFFICE USE ONLY:

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Fee: Amount Received	Check or Money Order Number	Date Payment Processed	Transmittal Number	LICENSE EXPIRATION December 31, 2003 AC-1 Rev.9/01
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